## FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1445/	05
OMB APPRO	
OMB Number:	3235-0076
Expires: August	31,2008
Estimated average	burden
hours per response	16.00

SEC USE ONLY								
Prefix	Serial							
	<u> </u>							
DATE RECEIVED								
1 .	1							

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Series A Convertible Voting Preferred Stock Representing	g ILC Membership Interests
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
Type of Filing: X New Filing Amendment	
A. BASIC IDENTIFICATION DATA	- I A DATA DATA DATA DATA DATA DATA DATA
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	08059772
ABD3 LLC	<u> </u>
Address of Executive Offices (Number and Street, City, State, Zip Code) 320 East 57th Street, 5A, New York, NY 10022	Telephone Number (Including Area Code) 646-391-1146
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business PROCESSE	Britangare Ilaw
Brief Description of Business  PROCLUCE  Develop an offline social networking platform	Section
Develop an offline social networking platform SEP 12 2008	
Type of Business Organization    corporation	ERSpecify):
Month Year  Actual or Estimated Date of Incorporation or Organization: UTZ 0 8 Actual Estim  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State  CN for Canada; FN for other foreign jurisdiction)	washington, Dunated 103
GENERAL INSTRUCTIONS	• .
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D (77d(6).	•
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given be which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities elow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	y signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need only repo thereto, the information requested in Part C, and any material changes from the information previously supplied by filed with the SEC.	rt the name of the issuer and offering, any changes lied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for substitution of the state and that have adopted this form. Issuers relying on ULOE must file a separate notice with the state to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	or the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal e appropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	xemption. Conversely, failure to file the ess such exemption is predictated on the

A-BASIGIDENTIFICATIONDATA	and and	
2. Enter the information requested for the following:		
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>		
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of</li> </ul>	of, 10% or more of	a class of equity securities of the issuer.
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and manual</li> </ul>	aging partners of	partnership issuers; and
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>		
Check Box(es) that Apply: Promoter X Beneficial Owner X Executive Officer	Director	▼ General and/or
Check Box(cs) that rippily.		Managing Partner
Braga, Sayles D.	<u>`</u>	
Full Name (Last name first, if individual)		
250 East 77th Street, Apt.5D, New York, NY 10075		
Business or Residence Address (Number and Street, City, State, Zip Code)		
		53. Consul and/or
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Darling V, Charles M.		
Full Name (Last name first, if individual)		
250 East 77th Street, 3A, New York, NY 10075		
Business or Residence Address (Number and Street, City, State, Zip Code)	•	
	<u> </u>	
Check Box(es) that Apply: Promoter Beneficial Owner XIX Executive Officer	Director	General and/or Managing Partner
Andrews IV, Mark E.		Managing Farinci
Full Name (Last name first, if individual)		,
320 East 57th Street, 5A, New York, NY 10022		
Business or Residence Address (Number and Street, City, State, Zip Code)		-
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	· <u>···</u>	
		•
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)	<del></del>	·
Turi Turio (Cast mano may a mano may may mano may may mano may	,	
Business or Residence Address (Number and Street, City, State, Zip Code)		:
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director	General and/or
Check Box(es) that Apply.	Ф	Managing Partner
Control of the state of the sta	<del></del>	
Full Name (Last name first, if individual)		
Olymbroad State City State Zin Code)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Boy(se) that Apply Promoter Beneficial Owner Executive Officer	Director	General and/or
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	[] Bliector	Managing Partner
Full Name (Last name first, if individual)		•
Business or Residence Address (Number and Street, City, State, Zip Code)		
<u> </u>	·	
(Use blank sheet, or copy and use additional copies of this s	sheet, as necessar	y) ·

			<del></del>		B. It	NFORMATI	ON ABOU	T OFFERI	NG		3	,	
1.	Has the	issuer sold	l, or does th			ll, to non-ac						Yes	No M
2.	What is	the minim	um investm									\$ <u>25</u> ,	000
												Yes	No
3. 4	Does the	e offering   = informat	permit joint ion request	t ownershi	p of a sing h nerson w	ho has bee	n or will b	e paid or p	given, direc	ctly or indi	rectly, any	_	
4.	If a person states	sion or sim on to be lis list the na	ilar remune ted is an ass tme of the b you may se	ration for s sociated pe roker or de	olicitation rson or age aler. If me	of purchase int of a brok ire than five	ers in conne er or deale e (5) person	ection with r registered is to be liste	sales of sec I with the S ed are asso	EC and/or	with a state		
Ful	I Name (I	ast name	first, if indi	ividual)	<u>-</u>								
Bus	siness or	Residence	Address (N	lumber and	Street, C	ity, State, Z	ip Code)	<del></del>					<u> </u>
Nar	Name of Associated Broker or Dealer										··		
						0-11-14.1	Db						
Stat			Listed Has									☐ All	States
						CO	CT	DE	DC	(FL)	(GA)	HI	(ID)
	AL	AK IN	(AZ)	AR KS	CA KY	LA	ME	MD	MA	ML	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH WV	OK WI	OR WY	PA PR
	RI	SC	SD	TN	TX	UT -	<u>V</u> T	(VA)	WA	<u>(w v)</u>	W1)	<u> </u>	
Ful	l Name (l	Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nar	me of Ass	sociated Br	oker or De	aler									
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)		***************************************		***************	**************		□ AI	l States
•	$\overline{AL}$	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	<u>[D]</u>
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{WV}$	WI	WY	PR
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (	Number an	d Street, C	City, State,	Zip Code)	<u> </u>				<del></del>	
Nai	me of Ass	ociated Br	oker or De	aler		<del> </del>	<del></del>	<del></del>	<u> </u>				
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers					<del></del> -	
	(Check	"All States	s" or check	individual	States)			***************************************	**************			☐ AI	States
	ĀL	AK	ĀZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	ΙL	IN	ĪA	KS	KY	LA	ME NV	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA
•	MT RI	NE SC	NV SD	NH TN	NJ TX	NM) UT	NY VT	VA	WA	WV	WI	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate Offering Price	Amount Aiready Sold
	Type of Security		
	Debt	s <u>0</u>	\$ <u>0</u>
	Equity	<u> 0</u>	<u>s_0</u>
	Common Preferred	E00 000	200 000
	Convertible Securities (including warrants)	<u>500,000</u>	s 300,000
	Partnership Interests	<u>s</u>	s <u>0</u>
	Other (Specify)	s0	_ s_ <u>0</u>
	Total	\$500,000	\$ 300,000
,	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors <b>9</b>	Dollar Amount of Purchases \$ 300,000
	Accredited Investors		\$ 0
	Non-accredited Investors		_ 3
	Total (for filings under Rule 504 only)	<del></del>	· 2
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		<u> </u>
	Regulation A		
	Rule 504	· · · · · · · · · · · · · · · · · · ·	s
•	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	e ·.	
,	Transfer Agent's Fees	[	] s <u> </u>
•	Printing and Engraving Costs		s
	Legal Fees		x \$ 40,000
	Accounting Fees		s0
	Engineering Fees		_ s
	Sales Commissions (specify finders' fees separately)		
	Sales Commissions (specify linuers lees separately)		
	Other Expenses (identify)	(	\$ 40,000

	b. Enter the difference between the aggregate offering price given in response to Part C — Question and total expenses furnished in response to Part C — Question 4.a. This difference is the "adjusted grosproceeds to the issuer."	S	s RXR 260,000
5.	Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate an check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C — Question 4.b above.	a	
•	proceeds to the issuer set forth in response to that a question in the desired	Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	· 🗀 \$	s
	Purchase of real estate	· 🗆 \$	
	Purchase, rental or leasing and installation of machinery and equipment	. [] <b>\$</b>	s
	Construction or leasing of plant buildings and facilities	· 🔲 \$	_
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	s	<b>\$</b>
	Repayment of indebtedness		
	Working capital	· 🗆 \$	
	Other (specify): Development and program fees and cost	. [_] \$	A 3 200,000
		. [] \$	
	Column Totals	\$_0.00	X 5 XXXXX 260,00
	Total Payments Listed (column totals added)		XXX 260,000
一	D. FEDERAL SIGNATURE		
-:-	e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this noti nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Comm information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) o	nssion, apon witte	ule 505, the following en request of its staff,
	uer (Print or Type) Signature	Date	2008
Na	Sayles Braga Title of Signer (Print or Type)  Sayles Braga Title of Signer (Print or Type)  Chief Executive Off		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E STATESTONATURE :		22.000.02
ί.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No .
	See Appendix, Column 5, for state response.		•
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is to D (17 CFR 239.500) at such times as required by state law.	ĭled a no	tice on Form
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, informa issuer to offerees.	tion furn	ished by the
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be en limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claim of this exemption has the burden of establishing that these conditions have been satisfied.	titled to iming the	the Uniform availability
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its beh thorized person.	alf by the	undersigned
Issucr (	Print or Type) Signature Date		<u>-</u>
	9/9/08	•	

Chief Executive Officer

Name (Print or Type) Sayles Braga

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

	250 S ( S/p <sup>2</sup> )			A. A.	PENĎIX:		<b>公司等</b>		N NA
l	Intend to non-a investor	2 I to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	4  Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	·					·			
AK			,	·					
AZ	<u>'</u>								
AR									
CA							· ·		
СО									
СТ		x	Convertible Security	1	\$5,000	0	0		X
DE									
DC									
FL					ļ		-		<u>                                     </u>
GA									
ні							<u> </u>		
ID									
IL							<u> </u>		
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IA					ļ. —			<u> </u>	
KS								<u> </u>	
KY							<u> </u>		
LA						<u> </u>			
ME									
MD					<u> </u>				
MA			·				ļ		
МІ									
MN									
MS									

				APP	ENDIX #			<b>*4</b> ***********************************	
1	2 3  Type of secur and aggrega offering price investors in State (Part B-Item 1)  Type of secur and aggrega offering price offering price offered in state (Part C-Item 1)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
мо							<u> </u>		
МТ									
NE									
NV									
NH									
נא									
NM							· 		
NY		X	Convertible Security	4	\$200,000	0	0		X
NC						<u></u>	<u> </u>	<u> </u>	
ND						i			
ОН			·.			· · · · · · · · · · · · · · · · · · ·	·	<u> </u>	<u> </u>
ок					<u> </u>				
OR		<u></u>							
PA									
RI									
SC							<u> </u>		
SD.								·	
TN								<del> </del>	
TX		Х	Convertible Security	4	\$95,000	0	0.		X
UT									<u> </u>
VT									
VA					-				<u> </u>
WA					<u> </u>				
wv					 				
WI									

1	to non-a investor	2 I to sell accredited s in State I-tem 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY.							<u></u>			
PR										

END